HOUSE BILL No. 1592

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-18-2; IC 16-21-10.

Synopsis: Health entity infection reporting. Requires the state department of health to develop a methodology for data collection, analysis, and publication related to health entity acquired infection rates. Requires health entities to report infection rate data.

Effective: July 1, 2007.

Dvorak

January 23, 2007, read first time and referred to Committee on Public Health.



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First Regular Session 115th General Assembly (2007)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2006 Regular Session of the General Assembly.

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HOUSE BILL No. 1592

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A BILL FOR AN ACT to amend the Indiana Code concerning health.

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Be it enacted by the General Assembly of the State of Indiana:

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SECTION 1. IC 16-18-2-166.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2007]: Sec. 166.5. "Health entity", for purposes of IC 16-21-10, has the meaning set forth in IC 16-21-10-1.

SECTION 2. IC 16-18-2-166.6 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2007]: Sec. 166.6. "Health entity acquired infection", for purposes of IC 16-21-10, has the meaning set forth in IC 16-21-10-2.

SECTION 3. IC 16-21-10 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2007]:

Chapter 10. Health Entity Acquired Infection Rate Reporting Sec. 1. As used in this chapter, "health entity" refers to a hospital or an ambulatory outpatient surgical center for which licensure is required under IC 16-21-2.



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1	Sec. 2. As used in this chapter, "health entity acquired	
2	infection" means a localized or systemic condition that:	
3	(1) affects an individual who is currently or was previously	
4	admitted to a health entity;	
5	(2) results from adverse reaction to the presence of an	
6	infectious agent or toxin; and	
7	(3) was not present or incubating at the time of the	
8	individual's admission to the health entity.	
9	Sec. 3. (a) The state department shall establish a list of health	
0	entity acquired infections for which data must be collected by	
.1	health entities. The list must include the following:	
2	(1) Surgical site infections.	
3	(2) Ventilator associated pneumonia.	
4	(3) Central line related bloodstream infections.	
.5	(4) Urinary tract infections.	
6	(5) Other infections as determined by the state department.	
7	(b) The state department shall develop a methodology for	
8	collection, analysis, and publication of the data described in	
9	subsection (a) to compare risk adjusted health entity acquired	
20	infection rates among health entities.	
21	Sec. 4. (a) A health entity shall:	
22	(1) collect the data required under section 3 of this chapter on	
23	an annual basis; and	
24	(2) beginning January 31, 2008, submit to the state	
25	department a report of the data collected during the previous	
26	calendar year.	
27	(b) The reports required under subsection (a)(2) must be	
28	submitted not later than January 31 of each year.	V
29	Sec. 5. The state department shall:	
0	(1) annually evaluate the quality and accuracy of the data	
31	collected under section 4 of this chapter; and	
32	(2) make any methodology changes determined to be	
3	necessary.	
34	Sec. 6. (a) Beginning January 31, 2008, the state department	
35	shall annually submit to the legislative council a report in an	
66	electronic format under IC 5-14-6.	
37	(b) The report submitted under subsection (a) must:	
8	(1) summarize the annual reports received from health	
9	entities;	
10	(2) compare the risk adjusted health entity acquired infection	
1	rates among health entities for the current and previous	
12	calendar years;	



1	(3) include an executive summary in plain language, including	
2	a discussion of the findings, conclusions, and trends	
3	concerning the state of health entity acquired infections in	
4	Indiana;	
5	(4) be published on the state department's Internet site; and	
6	(5) be made available by the state department upon request.	
7	(c) The state department shall:	
8	(1) disclose to the public the methodology used to create the	
9	report under subsection (b); and	
10	(2) publicize the availability of the report.	
11	Sec. 7. The state department may not disclose to any person or	
12	make public any information obtained under this chapter that may	
13	be used to identify an individual.	
14	Sec. 8. A health entity that violates this chapter is subject to:	
15	(1) sanctions specified in IC 16-21-3-1(1) through	
16	IC 16-21-3-1(5); and	
17	(2) a civil penalty of not more than one thousand dollars	
18	(\$1,000) per day for each day the health entity is in violation	
19	of this chapter;	
20	as determined by the state health commissioner.	
21	Sec. 9. The state department may adopt rules under IC 4-22-2	
22	to implement this chapter.	
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